PTO/SB/22 (08-03)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)				Oocket Number (Optional) 342312005300
In re Application of Marco CAVALERI et al.				
	Application Number 10/713,924			Filed November 14, 2003
	For COMPOSITIONS AND METHODS FOR TREATING BACTERIAL INFECTIONS WITH PROTEIN-DALBAVANCIN COMPLEXES			
	Art Unit 1645 Exa			miner Not Yet Assigned
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):				
One month (37 CFR 1.17(a)(1)) \$				
X Two months (37 CFR 1.17(a)(2))				\$ 420.00
Three months (37 CFR 1.17(a)(3))				\$
Four months (37 CFR 1.17(a)(4))				\$
Five months (37 CFR 1.17(a)(5))				\$
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is				
reduced by one-half, and the resulting fee is: \$				
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is attached.				
The Director has already been authorized to charge fees in this application to a Deposit Account.				
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952				
Hhave enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.				
I am the applicant/inventor				
I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71.				
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
x attorney or agent	of record. Registra	tion Number _		52,285
attomey or agent under 37 CFR 1.34(a).				
Registration number if acting under 37 CFR 1.34(a)				
August 2, 2004		4		note
Date (650) 813 5744			c	Signature Shannan Thomas
(650) 813-5744 Telephone Number				Shannon Thomas Ded or printed name
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below				
X Total of 1	form is submitted.			

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